FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1														
		(See instructions)					Office use only							
NAME OF COMMITTEE (in	full)	(Check if name is changed)	exan over	nple: If typyii the lines	ng, type	_1	2FE	4M5						
FREEDOM'S	PEFENSE FUND				111	1 1							لـــــا	
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ADDRESS (number and	street) 1155	- 15th Street, NV	N LLL		111		ш		ш	1 1	ш		لب	
(Check if add	Suite ress	e 614 					ш		ш		ш		لب	
is changed)		HINGTON			ш		DС		Ш	2000)5 [لب	
			CITY			ST	TATE.	_		ZII	CODE	≣ ▲		
COMMITTEE'S E-MA Scott@FECre														
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COMMITTEE'S WEB	PAGE ADDRESS (U	RL)												
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COMMITTEE'S FAX 3202159596	NUMBER													
2. DATE M 0 6	M / D D / Y	2006												
3. FEC IDENTIFICA	ATION NUMBER	(C COO	401786										
4. IS THIS STATEM	MENT NEV	V (N) OR	Х	AMEN	DED (A)									
I certify that I have exam	ined this Statement and	I to the best of my know	wledge an	d belief it is tr	ue, correct	t and co	omplet	е						
Type or Print Name of	Treasurer	SCOTT B MACKE	NZIE											
,														
Signature of Treasure	r Electronically File	d by SCOTT B	MACKE	NZIE		Da	te	^M 0 6	M /	0 5	/ Y	Ý 2 (0 [°] 0 7 [°]	
NOTE: Submission of fa		nplete information may								of 2 U.S.	C. S437	⁷ g.		
Office Use Only				For further Federal Elec Toll Free 80 Local 202-69	tion Comm 0-424-953	nission	act:			FEC (Revis	FOR ed 02/2			